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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Jasmine	
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Ollins	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- 2092	xxx - xx
Security number or federal Individual	OR	OR
Taxpayer	9 xx - xx-	9 xx - xx-
Identification number (ITIN)		

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D	ebtor 1 Jasmine First Name	Ollins Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		10233 S Racine Number Street	Number Street
		Chicago Illinois 60643	
		City State Zip Code Cook	City State Zip Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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De	ebtor 1 Jasmine	Ollins Case number (if known)
	First Name	Middle Name Last Name
Pa	rt 2: Tell the Court Abo	Your Bankruptcy Case
7.	The chapter of the Bankruptcy Code you are choosing to file under	theck one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for ankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pay Your Filing Fee in Installments</i> (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	No.
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known MM / DD / YYYY Case number, if known MM / DD / YYYY
11.	Do you rent your residence?	 No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you? ✓ No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.

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Ollins Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ✓ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Jasmine Ollins Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. The law requires that Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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Debtor 1 Jasmine First Name	Ollins Middle Name Last Na	Case number (if know	vn)
	estions for Reporting Purposes	me	
16. What kind of debts do you have?	16a. Are your debts primarily consumer incurred by an individual primarily No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily busi	narily for a personal, family, or house the same and the same are delayed the same are delayed to the	ehold purpose." bts that you incurred to obtain ne business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that funds No.	7. Go to line 18. o you estimate that after any exempt prowill be available to distribute to unsecur	
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you	correct. If I have chosen to file under Chapter of title 11, United States Code. I under Chapter 7. If no attorney represents me and I did out this document, I have obtained at I request relief in accordance with the I understand making a false statement.	er 7, I am aware that I may proceed, if derstand the relief available under ea d not pay or agree to pay someone wand read the notice required by 11 United States (ent, concealing property, or obtaining can result in fines up to \$250,000, or	Code, specified in this petition. g money or property by fraud in or imprisonment for up to 20 years, or
	Executed on 6/29/2018 MM / DD / YY	Executed	on

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Debtor 1 Jasmine		Ollins	Case number (if)	known)			
First Name	Middle Name	Last Name	_				
For your attorney, if you are represented by one	eligibility to proceed und	ler Chapter 7, 11, 1	2, or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the			
If you are not	debtor(s) the notice requ	ired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I			
represented by an	have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
attorney, you do not	· ·	, , ,					
need to file this page.	/s/ Michael Spangler		Date	6/29/2018			
	Signature of Attorney for		M	M / DD / YYYY			
	3						
	Michael Spangler						
	Printed name						
	Semrad Law Firm						
	Firm name						
	20 S. Clark Street Street						
	28th Floor						
	Chicago		Illinois	60603			
	Chicago City		State	Zip Code			
	Oity		State	Zip Code			
	Contact phone	3122568704	Email address	mspangler@semradlaw.com			
			Illinois				
	Bar number		State				

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Fill in this infor	mation to identify your ca	ase:	
Debtor 1	Jasmine		Ollins
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number (If known)			

Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$7,000.00
1c. Copy line 63, Total of all property on Schedule A/B	\$7,000.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	#10.400.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$13,482.00 ———————————————————————————————————
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$2,382.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$6,415.00
Your total liabilities	\$22,279.00
0	
Parking Summarize Your Income and Expenses	
	\$1,922.09
. Schedule I: Your Income (Official Form 106I)	\$1,922.09 \$1,975.00

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Deb	tor 1 Jasmine		Ollins	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	4: Answer These Que	estions for Administrat	tive and Statistical Records		
6. A	re you filing for bankrupto	y under Chapters 7, 11, o	or 13?		
	No. You have nothing to	report on this part of the fo	orm. Check this box and submit this	s form to the court with your other s	chedules.
Ŀ	Yes.				
7. W	/hat kind of debt do you h	ave?			
Ŀ			umer debts are those incurred by an Fill out lines 8-10 for statistical purp		
	Your debts are not print this form to the court with	-	ou have nothing to report on this pa	art of the form. Check this box and	submit
	From the Statement of Yo		ne: Copy your total current monthly orm 122C-1 Line 14.	income from Official	\$2,251.50
9.	Copy the following specia	al categories of claims fro	om Part 4, line 6 of Schedule E/F	:	
	From Part 4 on Schedule	E/F, copy the following:		Total claim	
	9a. Domestic support oblig	ations (Copy line 6a.)		\$0.00	_
	9b. Taxes and certain other	debts you owe the govern	ment. (Copy line 6b.)	\$2,382.00	-
	9c. Claims for death or per	sonal injury while you were	intoxicated. (Copy line 6c.)	\$0.00	-
	9d. Student loans. (Copy li	ne 6f.)		\$0.00	-
	9e. Obligations arising out priority claims. (Copy line 6		or divorce that you did not report as	\$0.00	-
	9f. Debts to pension or pro	fit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00	-

\$2,382.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	information to identify your ca	se:				
Debtor 1	Jasmine		Ollins			
Debtor 2	First Name	Middle Nam	e Last Name			
(Spouse, if fi	iling) First Name	Middle Nam	e Last Name			
United Sta	ates Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case nun	nber		(Glate)			
Officia	al Form 106A/B					Check if this is an amended filing
Sche	dule A/B: Prope	rty				12/1
category responsib write you	ategory, separately list and de where you think it fits best. Bo le for supplying correct inforn r name and case number (if kr Describe Each Residence	e as complete and nation. If more spac nown). Answer ever	accurate as possible. If two se is needed, attach a sepa y question.	o married peop rate sheet to t	le are filing together, both a his form. On the top of any a	are equally
1. Do you	u own or have any legal or equ	uitable interest in a	ny residence, building, lan	d, or similar pr	operty?	
	No. Go to Part 2					
1.1	Yes. Where is the property? Street address, if available, or o		That is the property? Check Single-family home Duplex or multi-unit buildir		the amount of any secu Creditors Who Have Cla	claims or exemptions. Put tred claims on <i>Schedule D:</i> nims Secured by Property.
		<u> </u>	Condominium or cooperat Manufactured or mobile ho		Current value of the entire property?	Current value of the portion you own?
	Number Street City State	Zip Code	Land Investment property Timeshare Other		Describe the nature o interest (such as fee s the entireties, or a life	simple, tenancy by
	Oily State	. L	/ho has an interest in the p	roperty? Check		ommunity property
		L	Debtor 1 only Debtor 2 only			
		Ė	Debtor 1 and Debtor 2 only	У		
			At least one of the debtors	and another		
			ther information you wish t roperty identification numb		is item, such as local	
If you	own or have more than one, lis	<u>w</u>	hat is the property? Check Single-family home	all that apply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i>
	Street address, if available, or o	ther description	Duplex or multi-unit buildir Condominium or cooperat Manufactured or mobile ho	ive	Current value of the entire property?	Current value of the portion you own?
	Number Street		Land			
	City State	Zip Code	Investment property Timeshare Other		Describe the nature o interest (such as fee s the entireties, or a life	simple, tenancy by
	,	. L	/ho has an interest in the p	roperty? Check		ommunity property
		° [ne. Debtor 1 only		Ц	
		Ī	Debtor 2 only			
		ř	Debtor 1 and Debtor 2 only	У		
		Ī	At least one of the debtors	and another		
			ther information you wish t		is item, such as local	

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Debtor 1	Jasmine First Name	Middle Name	Ollins Last Name	Case number	r (if known)	
1.3Stre	eet address, if available, or o		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	t apply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own?
Nu City	mber Street y State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature or interest (such as fee sthe entireties, or a life	imple, tenancy by e estate), if known.
			Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and the components of the debtors and and the comperty identification number:	nother	(see instructions)	mmunity property
	I the dollar value of the po ave attached for Part 1. W	rite that number h	.	luding any entrie	s for pages	
Do you o		equitable interes	t in any vehicles, whether they are also report it on Schedule G: Executo	-	-	
•	ans, trucks, tractors, sport u	•	·	37, 00.1111010 11.11	J. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15	
3.1	Model: Year:	Dodge Journey 2011	Who has an interest in the proone. Debtor 1 only	pperty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information: 2011 Dodge Journey	100000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community		Current value of the entire property? \$5550.00	Current value of the portion you own? \$5550.00
3.2	Make		instructions) Who has an interest in the proone.	pperty? Check		
	Model: Year: Approximate mileage:		Debtor 1 only			claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.

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Debtor 1	Jasmine		Ollins	Case numbe	er (if known)	
	First Name	Middle Name	Last Name			
3.3	Make Model:		Who has an interest in the prone.	roperty? Check	the amount of any secu	claims or exemptions. Pured claims on <i>Schedule L</i>
	Year:		Debtor 1 only		Creditors Who Have Cla	aims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only	,	entire property?	portion you own?
			At least one of the debtors	and another		
			Check if this is communi	ty property (see		
			instructions)			
3.4	Make		Who has an interest in the pr	roperty? Check	Do not deduct secured	claims or exemptions. Pu
	Model:		one.			red claims on Schedule I
	Year:		Debtor 1 only		Creditors Who Have Cla	aims Secured by Property.
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only	<i>'</i>	entire property?	portion you own?
			At least one of the debtors	and another		
			Check if this is communitions instructions)	ty property (see		
4.1	Yes Make		Who has an interest in the pr	roperty? Check		claims or exemptions. Pu
	Model: Year:		one.			red claims on <i>Schedule L</i> aims Secured by Property.
	Approximate mileage:		Debtor 1 only			
	Otherstefensestiese		Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
	Other information:		Debtor 1 and Debtor 2 only At least one of the debtors			
			Check if this is communi			
			instructions)	ty property (see		
4.2	Make		Who has an interest in the pr	roperty? Check	Do not deduct secured	claims or exemptions. Pu
	Model:		one.		-	red claims on Schedule L
	Year:		Debtor 1 only		Creditors Who Have Cla	aims Secured by Property.
	Approximate mileage:	-	Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 only	1	entire property?	portion you own?
			At least one of the debtors	and another		
			Check if this is communitions:	ty property (see		
5. Add	I the dollar value of the po	rtion you own for all	l of your entries from Part 2, inc	cluding any entrie	es for pages	EEO 00
vou ba	we attached for Part 2 Wi	ite that number her	re	-	<u>\$5</u>	550.00

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Ollins Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... cell phone \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$850.00 for Part 3. Write that number here

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Ollins Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Insight Debit \$600.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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Debt		Jasmine		Ollins	Case number (if known)	
		First Name	Middle Name	Last Name		_
20.	Nego Non	otiable instruments in -negotiable instrume No Yes. Give specific	prate bonds and other negotiab nclude personal checks, cashiers' ents are those you cannot transfer Issuer name:	checks, promissory notes, and	money orders.	
21.	Exar		accounts AA, ERISA, Keogh, 401(k), 403(b),	, thrift savings accounts, or othe	r pension or profit-sharing plans	
		No	Type of account:	Institution name:		
		Yes. List each account separately.	401(k) or similar plan:			
		coparatory.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	Your Exar com		prepayments deposits you have made so that vith landlords, prepaid rent, public			
		Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.	Ann	uities (A contract fo	r a periodic payment of money to	you, either for life or for a numb	er of years)	
	✓	No Yes	Issuer name and description:			
			-			

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Debte	or 1 Jasmine		Ollins	Case number (if known)	
24.	First Name	Middle Name	Last Name	er a qualified state tuition program.	
27.	26 U.S.C. §§ 530(b)(1),		qualified ABLE program, or unde	or a quantica state taition program.	
	No Institution Yes	name and description. Sepa	arately file the records of any interes	ts.11 U.S.C. § 521(c):	
25.	Trusts, equitable or fut exercisable for your be		other than anything listed in line	1), and rights or powers	
	✓ No				
	Yes. Describe				
26.			and other intellectual property ds from royalties and licensing agree	ements	
	√ No				
	Yes. Describe				
27.		nd other general intangibl			
		lits, exclusive licenses, coope	erative association holdings, liquor l	licenses, professional licenses	
	✓ No Yes. Describe				
	-				
Mon	ov or proporty owed	to you?			Current value of the
Mon	ney or property owed	to you?			Current value of the portion you own? Do not deduct secured claims or exemptions
	ney or property owed Tax refunds owed to you				portion you own?
					portion you own? Do not deduct secured
	Tax refunds owed to you No Yes. Give specific info	J ormation		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you No Yes. Give specific information about them, income you already filed.	ormation cluding whether d the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you ✓ No — Yes. Give specific info	ormation cluding whether d the returns			portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax year. Family support	ormation cluding whether d the returns	pport, child support, maintenance,	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax year. Family support	ormation cluding whether d the returns	apport, child support, maintenance,	State: Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax year Family support Examples: Past due or lunce and the tax and the tax year.	ormation cluding whether d the returns rs	apport, child support, maintenance,	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax year Family support Examples: Past due or lung No	ormation cluding whether d the returns rs	upport, child support, maintenance,	State: Local: divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax year Family support Examples: Past due or lung No	ormation cluding whether d the returns rs	pport, child support, maintenance,	State: Local: divorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t
28.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax year Family support Examples: Past due or lung No	ormation cluding whether d the returns rs	apport, child support, maintenance,	State: Local: divorce settlement, property settlemen Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax year Family support Examples: Past due or lung No	ormation cluding whether d the returns rs	ipport, child support, maintenance,	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you No Yes. Give specific info about them, inc you already filed and the tax year Family support Examples: Past due or lur No Yes. Give specific info Other amounts someon	prmation cluding whether d the returns rs Inp sum alimony, spousal su prmation		State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you No Yes. Give specific information about them, incomposed and the tax years Family support Examples: Past due or lunder No Yes. Give specific information Other amounts someon Examples: Unpaid wages,	prmation cluding whether d the returns rs Inp sum alimony, spousal su prmation	its, disability benefits, sick pay, vaca	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you ✓ No Yes. Give specific info about them, inc you already filec and the tax year Family support Examples: Past due or lur ✓ No Yes. Give specific info Other amounts someon Examples: Unpaid wages, Social Security	prmation cluding whether d the returns rs Inp sum alimony, spousal su prmation	its, disability benefits, sick pay, vaca	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed to you ✓ No Yes. Give specific info about them, inc you already filec and the tax year Family support Examples: Past due or lur ✓ No Yes. Give specific info Other amounts someon Examples: Unpaid wages, Social Security	prmation cluding whether d the returns rs Inp sum alimony, spousal su prmation	its, disability benefits, sick pay, vaca	State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb ⁻	tor 1 Jasmine		Ollins	Case number (if known)	
	First Name	Middle Nam	e Last Name		
31.	Interests in insurance Examples: Health, disab		ealth savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	Yes. Name the inst of each policy and		Company name:	Beneficiary:	Surrender or refund value
32.		y of a living trust, expec	n someone who has died t proceeds from a life insurance polic	cy, or are currently entitled to receive	
33.			t you have filed a lawsuit or made surance claims, or rights to sue	a demand for payment	
34.	Other contingent and to set off claims No Yes. Describe	I unliquidated claims o	of every nature, including counter	claims of the debtor and rights	
35.	Any financial assets y No Yes. Describe	rou did not already list			
36.		•	om Part 4, including any entries fo		\$600.00
Part	5: Describe Any B	usiness-Related Pr	operty You Own or Have an I	nterest In. List any real estate in Pa	art 1.
37.	No. Go to Part 6. Yes. Go to line 38.		nterest in any business-related pr	operty?	Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable No	or commissions you al	ready earned		or exemptions
	Yes. Describe				
39.	. No			achines, rugs, telephones, desks, chairs, el	ectronic devices
	Yes. Describe				

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Deb	tor 1 Jasmine	Ollins Case number (if known)	
	First Name	Middle Name Last Name	
40.	Machinery, fixtures, equi	ipment, supplies you use in business, and tools of your trade	
	✓ No		
	✓ No Yes. Describe		
	Yes. Describe		
11	Inventory		
41.	inventory		
	✓ No		
	Yes. Describe		
42.	Interests in partnerships	or joint ventures	
	✓ No		
		Name of entity: % of ownership:	
	Yes. Give specific information about		
	them		
		·	
43.	Customer lists, mailing lis	ts, or other compilations	
	✓ No		
		ude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	Too. Bo your note more	100 porcontainy least animalian (all definition in 11 0.0.0.0. § 101(1179).	
	No		
	Yes. Describe	4	
44.	Any business-related pro	pperty you did not already list	
	- N		
	✓ No		
	Yes. Give specific		
	information		
			<u> </u>
			
		<u>-</u>	<u> </u>
45. A	dd the dollar value of all o	of your entries from Part 5, including any entries for pages you have attached	
for Pa	art 5. Write that number h	nere	
<u> </u>	Danasila a Assa Fassa		
Part	t 6: Describe Any Farn	m- and Commercial Fishing-Related Property You Own or Have an Interest In. erest in farmland, list it in Part 1.	
	ii you own or nave an inte	erest in ranniand, list it in rat r.	
46.	Do you own or have any	legal or equitable interest in any farm- or commercial fishing-related property?	
	No. Go to Part 7.		Current value of the
			portion you own?
	Yes. Go to line 47.		Do not deduct secured claims
17	Farm animals		or exemptions
47.	Examples: Livestock, poul	try farm-raised fish	
	✓ No		
	Yes. Describe		
	_		

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Debt	or 1 Jasmine First Name		Ilins ast Name	Case number (if known)	
48.	Crops-either growing of		ist ivallie		
	✓ No				
	Yes. Describe				
	_				
49.	Farm and fishing equip	ment, implements, machinery, fixture	s, and tools of trade		
	✓ No				
	Yes. Describe				
	_				
50.	Farm and fishing suppl	ies, chemicals, and feed			
	√ No				
	Yes. Describe				
51.	Any farm- and commer	cial fishing-related property you did n	ot already list		
	✓ No				
	Yes. Describe				
52. A	dd the dollar value of al	I of your entries from Part 6, including	any entries for pages	you have attached	
		here		-	
				_	
Part 7	7: Describe All Pro	perty You Own or Have an Intere	st in That You Did N	ot List Above	
53.		perty of any kind you did not already lists, country club membership	st?		
	✓ No	,			
	Yes. Give specific				
	information				
					·
54 A	dd the dollar value of al	l of your entries from Part 7. Write tha	t number bere		•
04. A	du the donar value of ar	or your entires nom rate 7. write tha	it number nere		
Part 8	List the Totals of	Each Part of this Form			
55. F	Part 1: Total real estate	, line 2		>	
56. p	part 2 total vehicles, line	e 5	\$5550.00		
57. P	art 3: Total personal an	d household items, line 15	\$850.00		
58. P	art 4: Total financial as	sets, line 36	\$600.00		
59. F	Part 5: Total business-re	elated property, line 45			
60. F	Part 6: Total farm- and f	ishing-related property, line 52			
61. F	Part 7: Total other prope	erty not listed, line 54			
62. T	Total personal property.	Add lines 56 through 61.	\$7000.00		+ \$7000.00
				Copy personal property total	. 47000.00
					\$7000.00
63. T	otal of all property on S	chedule A/B. Add line 55 + line 62			

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Fill	in this infor	mation to identify your ca	ase:		
Deb	otor 1	Jasmine		Ollins	
		First Name	Middle Name	Last Name	
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name	
Uni	ted States B	ankruptcy Court for the:	Northern D	istrict of Illinois	
	se number			(State)	
(If kn	nown)				Charle if this is an
Of	fficial	Form 106C			Check if this is an amended filing
Sc	hedul	e C: The Prop	erty You Claim a	s Exempt	04/16
info as e add For stat the tax- und you	each iten te a specificamount of exempt reler a law to rexemption to the text of the text	Using the property you more space is needed ges, write your name at a form of property you classic dollar amount as a fany applicable statetirement funds—mat limits the exempton would be limited to the property You of exemptions are you are claiming state and feare claiming federal exemptions.	u listed on Schedule A/B: If ill out and attach to this pund case number (if known) im as exempt, you must sexempt. Alternatively, you utory limit. Some exempt ay be unlimited in dollar atton to a particular dollar to the applicable statutory. Claim as Exempt Claiming? Check one only, evideral nonbankruptcy exempt mptions. 11 U.S.C. § 522(b)(2)	Property (Official Form 106 page as many copies of Pa). specify the amount of the u may claim the full fair may claim the full fair may claim the sum as those for himount. However, if you camount and the value of y amount. See if your spouse is filing with you contions. 11 U.S.C. § 522(b)(3)	
		ription of the property hedule A/B that lists th		Amount of the exemption ye	·
		king account, nt Debit	\$600.00	\$600.0 100% of fair market val applicable statutory limit	alue, up to any
	Brief description Used Line from Schedule	furniture	\$300.00	\$300.0 100% of fair market val applicable statutory limit	alue, up to any
3.	Are you c	laiming a homestead ex		375? cases filed on or after the date of	

No Yes

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Deb	otor 1 Jasmine First Name Midd		Ollins Last Name	Case number (if known)	
Pari	2: Additional Page				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	•	mption you claim for each exemption.	Specific laws that allow exemption
	Brief description: cell phone Line from Schedule A/B: 07	\$200.00	100% of fair mapplicable stat	\$200.00 narket value, up to any tutory limit	735 ILCS 5/12-1001(b)
-	Brief description: Used Clothing Line from Schedule 4/8: 11	\$350.00	100% of fair mapplicable stat	\$350.00 harket value, up to any tutory limit	735 ILCS 5/12-1001(a)

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		D0	cument 1 age 22 of	03		
Fill in t	this information to identify your c	ase:				
Debto			Ollins			
Debtoi	First Name r 2	Middle Name	Last Name			
(Spouse	e, if filing) First Name	Middle Name	Last Name			
United	States Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case r	number n)		(State)			
Offi	cial Form 106D			_		Check if this is a amended filing
	•	ors Who Hay	ve Claims Secur	ed by Prop		12/1
Part 1	Yes. Fill in all of the information: List All Secured Claims List all secured claims. If a cred separately for each claim. If more	mit this form to the court von below. Ilitor has more than one secthan one creditor has a part	with your other schedules. You ha	ve nothing else to reposition of the column A Amount of claim	ort on this form. Column B Value of	Column C Unsecured
	in Part 2. As much as possible, lis name.	t the claims in alphabetical (order according to the creditor's	Do not deduct the value of collateral.	collateral that supports this claim	portion If any
2.1	OVERLND BOND Creditor's Name 4701 W FULLERTON Number Street	2011 Dodge Journey	that secures the claim: the claim is: Check all that apply.	<u>\$13,482.00</u>	\$5,550.00	\$7,932.00
	CHICAGO IL 60639 City State ZIP Code Who owes the debt? Check one Debtor 1 only	Unliquidated Disputed Nature of lien. Check a	ll that apply.			
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	car loan) Statutory lien (such Judgment lien from				
	Check if this claim relates to a community debt Date debt was 5/2017 incurred	Other (including a right				

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$13,482.00

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Fill in t	this inforr	nation to identify your c	ase:					
Debto	r 1	Jasmine		Ollins				
Debto	r 2	First Name	Middle Name	Last Name				
	e, if filing)	First Name	Middle Name	Last Name				
United	States B	ankruptcy Court for the:	Northern	District of Illinois				
Case r	number n)			(State)				
Offic	cial Fo	orm 106E/F				Chec	k if this is an	amended filing
Scł	nedu	le E/F: Cre	ditors Who	Have Unsecure	d Claims			12/1
other p Form 1 claims the ent known	party to a 06A/B) at that are tries in th). List A O any cro	any executory contracts and on Schedule G: Exe listed in Schedule D: C ne boxes on the left. At All of Your PRIORIT	s or unexpired leases the cutory Contracts and U Creditors Who Hold Clai		executory contract G). Do not include a ce is needed, copy	s on <i>Schedul</i> any creditors the Part you	le A/B: Prope with partial u need, fill it	erty (Official lly secured out, number
2. L	sted, iden As much a Continuati	tify what type of claim it as possible, list the claims on Page of Part 1. If mor	is. If a claim has both pri is in alphabetical order acc re than one creditor holds	s more than one priority unsecured clair ority and nonpriority amounts, list that o cording to the creditor's name. If you ha a particular claim, list the other creditor as for this form in the instruction bookle	claim here and show we more than two p s in Part 3.	both priority	and nonprior	ity amounts.
						Total claim	Priority amount	Nonpriority amount
2.1	IRS 1			Last 4 digits of account number		\$1,488.00	\$1,488.00	\$0.00
	Priority C PO Box 7	reditor's Name 7346		When was the debt incurred?	n/a			
2.2	Debt Debt Debt At lea Chec Is the cla Y No Yes	hia Pennsylval State urred the debt? Check of tor 1 only tor 2 only tor 1 and Debtor 2 only ast one of the debtors and ok if this claim relates aim subject to offset?	Zip Code one. nd another to a community debt	As of the date you file, the claim is apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts yo government Claims for death or personal injurintoxicated Other. Specify	n: u owe the ry while you were	\$894.00	\$894.00	\$0.00
<u> </u>		reditor's Name		Last 4 digits of account number When was the debt incurred?	 n/a			
	Number	Street		As of the date you file, the claim is				
	Debt Debt Debt At lea	Id Illinois State urred the debt? Check of the constant of the constant of the debtor 2 only ast one of the debtors are ck if this claim relates aim subject to offset?	nd another	apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim Domestic support obligations Taxes and certain other debts yo government Claims for death or personal injurintoxicated Other. Specify	n: u owe the ry while you were			

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Ollins Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** ABILITY RECOVERY SERVI 4.1 \$472.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 4031 When was the debt incurred? 3/2018 Number Street As of the date you file, the claim is: Check all that apply. Contingent WYOMING Pennsylvania 18644 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only $\overline{\mathbf{v}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes AD ASTRA RECOVERY SERV \$505.00 Last 4 digits of account number 6226 Nonpriority Creditor's Name When was the debt incurred? 11/2015 7330 W 33RD ST N STE 118 Number Street As of the date you file, the claim is: Check all that apply. Contingent 67205 **WICHITA** Kansas Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only $\overline{}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? $\overline{}$ ORIGINAL CREDITOR: SPEEDY **✓** No Other, Specify CASH 128 Yes Bank of America \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 982236 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated El Paso Texas 79998 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? No Yes

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Part 2	Your NONPRIORITY Unsecured Claims - Continuation	n Page	
	After listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.4	CREDITONEBNK	Last 4 digits of account number 0660	\$1,862.00
	Nonpriority Creditor's Name PO BOX 98872	When was the debt incurred? 8/2012	·
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	LAS VEGAS Nevada 89193 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	Yes		
[]	<u> </u>		** **
4.5	ENHANCED RECOVERY CO L Nonpriority Creditor's Name	 Last 4 digits of account number 7613 	\$1,175.00
	8014 BAYBERRY RD	When was the debt incurred? 7/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	MOVOONI/ILLE FILMS	- Contingent	
	JACKSONVILLE Florida 32256 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: SPRINT	
	✓ No		
	Yes		
4.6	IDES Springfield Nonpriority Creditor's Name	 Last 4 digits of account number 	\$1,000.00
	PO Box 19286	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Benefit Repayments	- Contingent	
	Springfield Illinois 62794	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify unemployment overpayment	
	✓ No		
	Yes		

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Debtor 1 Jasmine Ollins Case number (if known)
First Name Middle Name Last Name

Port 2: Vour NONPRIORITY Unsequed Claims - Centinuation Page

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	Page	
	After listing any entries on this page, number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
4.7	KOHLS/CAPONE Nonpriority Creditor's Name PO BOX 3115 Number Street	Last 4 digits of account number 7218 When was the debt incurred? 7/2017 As of the date you file, the claim is: Check all that apply.	\$565.00
	MILWAUKEE Wisconsin 53201 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	
4.8	TURNER ACCEP Nonpriority Creditor's Name 4450 N WESTERN Number Street CHICAGO Illinois 60625 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 1216 When was the debt incurred? 1/2012 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 21 Automobile	\$336.00

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Debtor 1 Jasmine Ollins Case number (if known)

	Widdle Name			
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim			
	mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for st	atistical reporting purpo	oses only
			Total claims	
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00	
	6b. Taxes and certain other debts you owe the government	6b.	\$2,382.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00	
	6e. Total. Add lines 6a through 6d.	6e.	\$2,382.00	
			Total claims	
Total claims from Part 2	6f. Student loans	6f.	\$0.00	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$6,415.00	
	6j. Total. Add lines 6f through 6i.	6j.	\$6,415.00]

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Debtor 1	Jasmine		Ollins
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case number			

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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		Do	cument rage	29 01 03
Fill in this infor	mation to identify your	case:		
Debtor 1	Jasmine		Ollins	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	: Northern	District of Illinois	
			(State)	
Case number (If known)				
				Check if this is an
Ott: ∘: ∘!	Cours 10011			amended filing
Oniciai	Form 106H			
Schedul	e H: Your Co	debtors		12/15
No Yes 2. Within the Idaho, Lou No. Yes.	e last 8 years, have you uisiana, Nevada, New Mo Go to line 3. Did your spouse, form	exico, Puerto Rico, Texas, W ner spouse, or legal equiva	perty state or territory? (ashington, and Wisconsin.) lent live with you at the tim	Community property states and territories include Arizona, California, ee?
	Yes. In which commur	ity state or territory did you	ı live?	_ Fill in the name and current address of that person.
	Name of your spouse,	former spouse, or legal equ	ivalent	
	Number Street			
	City	State	Zip Code	
again as a	a codebtor only if that	person is a guarantor or c	osigner. Make sure you h	your spouse is filing with you. List the person shown in line 2 ave listed the creditor on Schedule D (Official Form 106D), Jule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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						<u> </u>			
Filli	n this inf	ormation to identify	your case:						
Deb	 tor 1	Jasmine		Ollins					
- 0.0		First Name	Middle Name	Last N	lame)	— Che	eck if this is:	
	tor 2						_ 🗖	An amended filing	
(Spot	ise, if filing)	First Name	Middle Name	Last N	lame)		•	
-	ed States	Bankruptcy Court for	Northern	District of III			_ ⊔	A supplement showing post- expenses as of the following	
the:	e number			(5	State))		oxpenses as or the relieving	dato.
(If kn		-					_	MM / DD / YYYY	
Off	icial	Form 106I							
Sc	hedul	le I: Your In	come						12/1
infor spou num	mation a se. If mo ber (if kn	bout your spouse. I	f you are separated and , attach a separate she y question.	d your spou	se is	not filing	with you, do	ur spouse is living with yo not include information a iional pages, write your n	about your
	-	r employment		Debtor 1				Debtor 2	
	informatio	on.	Employment status	- Emplo	wad			- Employed	
	-	e more than one job, parate page with	p.:0,	Emplo	-	ved		Employed Not Employed	
		n about additional			прю	yeu		I Not Employed	
	employers.		Occupation	Dietary Aid	de			_	
	Include pa self-emplo	rt time, seasonal, or	Employer's name	Healthcare	Serv	rice Group			
	•		Employer's address	8001 S W	ester	n Ave			
	•	n may include student aker, if it applies.		Number St	reet			Number Street	
								_	
				Chicago		Illinois	60620	<u> </u>	
				City		State	Zip Code	City State	Zip Code
			How long employed there?	1 year 10	mon	ths			
Par	t 2: Giv	e Details About N	nonthly Income						
spo If y	ouse unles ou or your	s you are separated.	e more than one employer,	,			•	write \$0 in the space. Include or that person on the lines be	, ,
						For I	Debtor 1	For Debtor 2 or non-filing spouse	
2.			ary, and commissions (befo , calculate what the monthly		2.		\$2,080.00		
3.	Estimate	e and list monthly ove	rtime pay.		3.		+ \$87.75		
4.	Calculat	te gross income. Add li	ne 2 + line 3.		4.		\$2,167.75		

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Deb	tor 1Jasmine First Name		Ullins Last Name		Case numbe	r <i>(if</i>		
	HISTINGHIE	widdle Name	Last Name		known) For Debtor 1	For Debtor 2 or non-filing spouse		
Co	opy line 4 here		→	4.	\$2,167.75			
5. Li :	st all payroll deduction							
5	a. Tax, Medicare, and	Social Security deductions		āa.	\$174.11			
5	b. Mandatory contrib	utions for retirement plans		ōb.	\$0.00			
5	c. Voluntary contribut	tions for retirement plans		ōc.	\$0.00			
5	d. Required repaymer	nts of retirement fund loans		ōd.	\$0.00			
5	e. Insurance			ōe.	\$0.00			
51	f. Domestic support o	bligations	į.	ōf.	\$0.00			
5	g. Union dues		Į.	ōg.	\$71.54			
5	h. Other deductions.	Specify:		5h. +	\$0.00 +			
6. A c +5h.		ions. Add lines 5a + 5b + 5c + 5d + 5e +5	6f + 5g 6	3.	\$245.66			
7. C a	alculate total monthly	y take-home pay. Subtract line 6 from line	e 4.	7.	\$1,922.09			
8. Li :	st all other income re	gularly received:						
8:	business, profession	·						
	gross receipts, ordina	or each property and business showing ary and necessary business expenses, and	b					
	the total monthly net			За.	\$0.00			
	b. Interest and divide			3b.	\$0.00			
8	dependent regularl	•						
		ousal support, child support, maintenance, nd property settlement.		Вс.	\$0.00			
8	d. Unemployment co n	npensation	8	3d.	\$0.00			
8	e. Social Security		8	3e.	\$0.00			
8:	Include cash assistan cash assistance that y	assistance that you regularly receive nee and the value (if known) of any non- you receive, such as food stamps (benefits tall Nutrition Assistance Program) or		3f.	\$0.0 <u>0</u>			
8	g. Pension or retirem	ent income	8	3g.	\$0.00			
81	h. Other monthly inco	ome. Specify:		3h. +	\$0.00 +			
9. A c	dd all other income Ad	dd lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h. 9	Э.	\$0.00			
	•	ome. Add line 7 + line 9. If for Debtor 1 and Debtor 2 or non-filing s		10.	\$1,922.09]=	\$1,922.09
In fri	nclude contributions fro iends or relatives.	r contributions to the expenses that you man unmarried partner, members of your unts already included in lines 2-10 or amo	r household	l, your o	dependents, your roomr	•		
_	pecify:						11. +	\$0.00
		e last column of line 10 to the amount i					12.	¢1 022 00
V	mie that amount on the	e Summary of Schedules and Statistical Su	unmary of (Jertain i	iaviiities and Kelated Da	а:а, іт ії арріles		\$1,922.09 Combined monthly income
13.	No.	ease or decrease within the year after	you file th	is form	?			,
L	Yes. Explain:							

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		2004				
Fill in this infor	mation to identify	your case:				
Debtor 1	Jasmine		Ollins			
	First Name	Middle Name	Last Name	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng	
United States F			District of Illinois	A supplement s	howing pos	t-petition chapter 13
United States E	Bankruptcy Court fo	or the. <u>Northern</u> L	(State)	expenses as of		
Case number (If known)				MM / DD / YYY		
				WIWI / DD / TTT	ı	
Official	Form 106	6J				
Schedul	e J: Your I	— Fxnenses				12/15
		-				
		s possible. If two married people ar eded, attach another sheet to this				
	wer every question		, ,			
Part 1: Des	cribe Your Hou	sehold				
1. Is this a joi	nt case?					
✓ No. Go	to line 2					
	oes Debtor 2 live	in a separate household?				
ш,	No	•				
L						
L	Yes. Debtor 2 n	nust file Official Forms 106J-2, <i>Expen</i>	ses for Separate Household of Debt	or 2.		
2. Do you hav	e dependents?	No				
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for	Dependent's relationship to	Dependent's		pendent live
Debtor 2.		each dependent	Debtor 1 or Debtor 2 Child	age 10 years	with you No.	1?
			Offilia	10 years	Yes.	
			Child	11 years	No.	
			-		✓ Yes.	
3. Do your exp	penses include					
expenses o	f people other	✓ No				
yourself an	•	Yes				
dependents	s?					
Part 2: Esti	mate Your Ong	oing Monthly Expenses				
	_	our bankruptcy filing date unless y	ou are using this form as a supple	ment in a Chanter 1	3 case to r	enort
		e bankruptcy is filed. If this is a sup				
applicable da	te.					
	•	non-cash government assistance i uded it on Schedule I: Your Income	•			Your expenses
			•			
	I or home owners or the ground or lot	hip expenses for your residence. In t. 4.	clude first mortgage payments and		4.	\$700.00
-	uded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Prope	rty, homeowner's,	or renter's insurance			4b.	\$0.00
4c. Home	maintenance, repa	ir, and upkeep expenses			4c.	\$0.00

4d.

\$0.00

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Jasmine
 Ollins
 Case number (if known)

 Last Name
 Last Name

i iist vaine wiidde vaine Last vaine		
		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$0.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$100.00
6d. Other. Specify:	6d	\$0.00
7. Food and housekeeping supplies	7.	\$700.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$125.00
10. Personal care products and services	10.	\$100.00
11. Medical and dental expenses	11.	\$50.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 	12.	\$200.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$0.00
15d. Other insurance. Specify:	15d	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16	\$0.00
17. Installment or lease payments:	10	
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from		\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.Other payments you make to support others who do not live with you.		** **
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes.		
20c. Property, homeowner's, or renter's insurance	20b	\$0.00
20d. Maintenance, repair, and upkeep expenses.	20c	\$0.00
20e. Homeowner's association or condominium dues	20d	\$0.00
255. Tomos mai a descondition of condominatin dues	20e	\$0.00

Official Form 106J Schedule J: Your Expenses page 2

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lasmine		Ollins	Case number (if known)		
irst Name	Middle Name	Last Name			
Specify:				21	\$0.00
late your monthly exp	penses.				\$1,975.00
dd lines 4 through 21.		\$0.00			
opy line 22 (monthly ex		\$1,975.00			
dd line 22a and 22b. Th	he result is your monthly exp	enses.		22.	
ate your monthly net	income.				
opy line 12 (your comb	pined monthly income) from S	Schedule I.		23a	\$1,922.09
opy your monthly expe	enses from line 22 above.			23b	\$1,975.00
		ncome.			(\$52.91)
he result is your month	lly net income.			23c	
	Intervolution increase and payment to increase and payment to increase and payment to increase as a contract of the contract o	Specify: Itate your monthly expenses. Italiant in a specific state your monthly expenses for Debtor 2), if any, and lines 4 through 21. Italiant in a specific state your monthly expenses for Debtor 2), if any, and line 22a and 22b. The result is your monthly expense your monthly net income. It is your monthly expenses from line 22 above. It is your monthly expenses from your monthly in the result is your monthly net income. It is paying for your expenses are payment to increase or decrease because of a new second	Specify: Specif	Specify: late your monthly expenses. Id lines 4 through 21. In populine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. In populine 12 (your combined monthly income) from Schedule I. In populine 12 (your combined monthly income) from Schedule I. In populine 12 (your monthly expenses from line 22 above. In population of the result is your monthly income. In population of the result is your monthly net income. In po	Is a specify: Specify: 21 21 21 21 21 21 21 2

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Fill in this information to identify your case:							
Debtor 1	Jasmine		Ollins				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number (If known)			(State)	—			

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below								
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	☑ No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and								
	that they are true and correct.								
X	/s/ Jasmine Ollins	×							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 6/29/2018	Date							
	MM/DD/YYYY	MM/DD/YYYY							

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Fill in	n this info	rmation to identify your o	ase:					
Deb	tor 1	Jasmine		Ollins				
Deb	tor 2	First Name	Middle N	Name Last Nar	ne			
	use, if filing)	First Name	Middle N	Name Last Nar	ne			
Unit	ed States I	Bankruptcy Court for the:	Northern	District of Illin				
	e number			(Sta	ite)			
(If kno	-							Check if this is a
<u>Of</u>	ficial	Form 107						amended filing
Sta	ateme	nt of Financia	l Affairs f	or Individuals	Filing for	Bankrı	ıptcy	04/1
infor	mation.		ed, attach a sepa	arried people are filing arate sheet to this forn				
Pari	Give	e Details About Your	Marital Status	and Where You Lived	d Before			
1.	What is	your current marital st	atus?					
	Ма	ırried						
	✓ No	t married						
2.	During	the last 3 years, have yo	ou lived anywhere	other than where you l	ive now?			
	✓ No ☐ Yes		ou lived in the last	3 years. Do not include	where you live r	now.		
	De	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
	Nu	mber Street		From	Number Stre	et		From
				To				То
	City	y State	Zip Code		City	State	Zip Code	
		,	p			Debtor 1	p	Same as Debtor 1
					_			
	Nu	mber Street		From	Number Stre	et		From
				То				То
	City	y State	Zip Code		City	State	Zip Code	
3.	and territo No	<i>pries</i> include Arizona, Califo	ornia, Idaho, Louis	ouse or legal equivalent iana, Nevada, New Mexico Codebtors (Official Form	, Puerto Rico, Te		- '	

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Debt	or 1	Jasmine	Ollins	Case nu	ımber (if known)	
		First Name Middle	Name Last Nan	ne		_
Part	2:	Explain the Sources of Your Inc	come			
Fill		you have any income from employm n the total amount of income you receiv rities. If you are filing a joint case and you No Yes. Fill in the details.	red from all jobs and all busing	nesses, including part-time		ars?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		om January 1 of current year until e date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$13385.69	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	\$23441.00	Wages, commissions, bonuses, tips Operating a business	-
		or the calendar year before that: anuary 1 to December 31, 2016) YYYY	Wages, commissions, bonuses, tips Operating a business	\$8271.00	Wages, commissions, bonuses, tips Operating a business	·
I F f	nclu oubli iling _ist e	you receive any other income during de income regardless of whether that in ic benefit payments; pensions; rental incapion a joint case and you have income that each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples come; interest; dividends; moyou received together, list it of	of other income are alimony; coney collected from lawsuits; only once under Debtor 1.	royalties; and gambling and lot	
•			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:				
		or last calendar year: lanuary 1 to December 31, 2017) YYYY				
		or the calendar year before that: lanuary 1 to December 31, 2016) YYYY				

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Ollins Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment Dates of payment Total amount paid Amount you still owe for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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1	Jasmine			Olli	ns	Case number	(if known)
	First Name		Middle Name	Last	t Name		
nsi orp ge	ders include your porations of which	relatives; and you are and for a busin	ny general partners n officer, director, p ess you operate as	r; relatives of any operson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing c domestic support obligations,
✓	No						
	Yes. List all pay	ments to a	an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
-	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	No	_	ranteed or cosigne t benefited an insi		Total amount paid	Amount you still owe	Reason for this payment
							Include creditor's name
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	moluci o Name						
	Number Street						

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Ollins Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	or 1	Jasmine		Ollins	Case number (if known	n)	
		First Name Middle Name		Last Name	<u> </u>	· -	
11.		thin 90 days before you filed for bankrupto counts or refuse to make a payment beca			bank or financial institution,	set off any amou	ints from your
	✓	No Yes. Fill in the details.					
	Ш	res. Fill III the details.					
				Describe the action the	ne creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account	number: XXXX-		
		City State Zip Code					
12.		hin 1 year before you filed for bankruptcy pointed receiver, a custodian, or another o			possession of an assignee f	or the benefit of o	creditors, a court-
	V	No					
		Yes					
Part	5.	List Certain Gifts and Contributions					
13.	Wi	ithin 2 years before you filed for bankrupto	y, did y	ou give any gifts with a	total value of more than \$60	0 per person?	
	✓	No					
		Yes. Fill in the details for each gift.					
		Gifts with a total value of more than \$60 per person	0	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code					
		Person's relationship to you					
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Code Person's relationship to you					

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Debi	i 101	Jasmine		Ollins	Case number (if know	(n)	
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years before you filed fo	or bankruptcy, did	you give any gifts or contrib	outions with a total value	of more than \$600	to any charity?
	V	No					
	H	Yes. Fill in the details for eac	h aift or contribution	on			
	Ш						
		Gifts or contributions to cha	arities	Describe what you cont	ributed	Date you	Value
		that total more than \$600				contributed	
		Charity's Name		•			
		•					
		Number Street		•			
		City State	Zip Code	•			
		•	•				
Part	t 6:	List Certain Losses					
15.	Wit	hin 1 year before you filed for	bankruptcy or sin	ce you filed for bankruptcy,	did you lose anything bed	ause of theft, fire,	other disaster, or
		nbling?	, ,		, , ,		,
		No					
	✓						
		Yes. Fill in the details.					
		Describe the property you lo	ost and	Describe any insurance	coverage for the loss	Date of your	Value of property
		how the loss occurred		Include the amount that i		loss	lost
				pending insurance claims	on line 33 of Schedule		
				A/B: Property.			
						_	
Part	7:	List Certain Payments or	Transfers				
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre	bankruptcy, did y paring a bankrupt	cy petition?			anyone you consulted
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	bankruptcy, did y paring a bankrupt	cy petition?			anyone you consulted
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p	bankruptcy, did y paring a bankrupt	cy petition?			anyone you consulted
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	bankruptcy, did y paring a bankrupt	cy petition?	r services required in your b		anyone you consulted Amount of
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	bankruptcy, did y paring a bankrupt	ccy petition? r credit counseling agencies fo	r services required in your b	Date payment or transfer	
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No	bankruptcy, did y paring a bankrupt	ccy petition? r credit counseling agencies fo Description and value of	r services required in your b	ankruptcy. Date payment	Amount of
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No Yes. Fill in the details.	bankruptcy, did y paring a bankrupt	ccy petition? r credit counseling agencies fo Description and value of	r services required in your b	Date payment or transfer	Amount of
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	bankruptcy, did y paring a bankrupt	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street	bankruptcy, did y paring a bankrupt	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid	bankruptcy, did y paring a bankrupt	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or pre ude any attorneys, bankruptcy p No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street	bankruptcy, did y paring a bankrupt	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy provide any atto	bankruptcy, did y paring a bankrupt petition preparers, or	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois	bankruptcy, did y paring a bankrupt betition preparers, or bettition preparers, but the bettition preparers are bettition preparers.	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy provide any atto	bankruptcy, did y paring a bankrupt petition preparers, or	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois	bankruptcy, did y paring a bankrupt betition preparers, or bettition preparers, but the bettition preparers are bettition preparers.	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for but seeking bankruptcy or preduce any attorneys, bankruptcy or No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for but seeking bankruptcy or preduce any attorneys, bankruptcy or No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for but seeking bankruptcy or preduce any attorneys, bankruptcy or No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for but seeking bankruptcy or preduce any attorneys, bankruptcy or No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or preduce any attorneys. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer Person Who Was Paid Number Street	bankruptcy, did y paring a bankrupt betition preparers, or betition preparers, or betition preparers betition preparers between the betwee	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or preduce any attorneys. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer Person Who Was Paid Number Street	bankruptcy, did y paring a bankrupt betition preparers, or settion	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or preduce any attorneys. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer Person Who Was Paid Number Street	bankruptcy, did y paring a bankrupt betition preparers, or settion	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment
	Wit abo	hin 1 year before you filed for out seeking bankruptcy or preduce any attorneys, bankruptcy or preduce any attorneys. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Paymer Person Who Was Paid Number Street City State	60603 Zip Code Zip Code	ccy petition? r credit counseling agencies for Description and value of transferred	r services required in your b	Date payment or transfer was made	Amount of payment

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	Jasmine			ase number <i>(if known)</i>		
	First Name	Middle Name	Last Name			
hel	thin 1 year before you file p you deal with your cred not include any payment o	litors or to make payn	you or anyone else acting on your beh nents to your creditors? on line 16.	alf pay or transfer	any property to an	yone who promised
✓	No Yes. Fill in the details.					
ш	103. I III III u lo detallo.		Decembring and value of any man		Dete	A
			Description and value of any propertransferred	berty	Date payment or transfer was made	Amount of payment
	Person Who Was Paid		-			
	Number Street		-			
			-			
	City State	Zip Code	-			
	No Yes. Fill in the details.		Description and value of property transferred	payments red	property or ceived or debts pai	
	David Miles David and Te		-	in exchange		made
	Person Who Received Tra	anster				
	Number Street		-			
	City State	•	-			
	Person's relationship to y	ou				
	Person Who Received Tra	ansfer	- -			
	Number Street		-			
	City State Person's relationship to y	Zip Code ou	-			
ber	chin 10 years before you for the state of the called asset-pesse are often called asset-pesses.		d you transfer any property to a self-s	ettled trust or simi	lar device of which	n you are a
✓	No Yes. Fill in the details.					
	100. 1 111 111 116 (1614)		Description and value of the pro	pperty transferred		Date transfer was made
	Name of trust					

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Ollins Debtor 1 Jasmine Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street

City

State

State

7in Code

Citv

Zip Code

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Debtor 1 Jasmine Case number (if known) First Name Middle Name **Identify Property You Hold or Control for Someone Else** Part 9: 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet**

City

State

Zip Code

State

Zip Code

City

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Deb		Jasmine			Ollins	Cas	se number <i>(ii</i>	f known)	
		First Name	N	Middle Name	Last Name				
26.	Hav		y in any judici	al or administra	ative proceeding un	der any environmer	ntal law? In	clude settlements and ord	ers.
		No Yes. Fill in the det	ails.						
		Coop title		(Court or agency		Nature	of the case	Status of the case
		Case title			Court Name				Pending
		Case number		 i	NumberStreet				On appeal Concluded
		la: - : :	5		City State	Zip Code			
Part					nnections to Any				_
27.	With	A sole propri	etor or self-en a limited liabi a partnership rector, or mar at least 5% of	nployed in a tra lity company (L naging executiv the voting or ed . Go to Part 12.	de, profession, or of LC) or limited liability e of a corporation quity securities of a c	ther activity, either for partnership (LLP)	_	connections to any business	s?
					Describe the n	nature of the busine	ess	Employer Identification r include Social Security r	
		Business Name			_			EIN:	
		Number Street			Name of accou	untant or bookkeep	per	Dates business existed	
		City	State	Zip Code				From To	
					Describe the n	nature of the busine	ess	Employer Identification r include Social Security r	
		Business Name			_			EIN:	
		Number Street			Name of accou	untant or bookkeep	per	Dates business existed	
		City	State	Zip Code	_			From To	
					Describe the n	nature of the busine	ess	Employer Identification rainclude Social Security r	
		Business Name			_			EIN:	
		Number Street			Name of accou	untant or bookkeep	per	Dates business existed	
		City	State	Zip Code				From To	

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Debto	or 1 Jasmine		Ollins	Case number (if known)
	First Name	Middle Name	Last Name	
	Within 2 years before creditors, or other par		ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
	√ No			
	Yes. Fill in the deta	ails below.		
	_		Date issued	
	Name		MM/DD/YYYY	
	Ni inala au Otua at		_	
	Number Street			
	City	State Zip Code	_	
		_μ στου		
Part	12: Sign Below			
tr	ue and correct. I unde bankruptcy case can	rstand that making a false sta result in fines up to \$250,000,	tement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/S/ .	Jasmine Ollins		Signature of Debtor 2
	Signati	re of Debtor 1		ŭ
	Date 6	/29/2018		Date
_ n	id vou attach addition	al nages to Vour Statement of	Financial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
_	_	ar pages to Tour Statement or	Financial Analis for individ	uais rining for bankruptcy (Onicial Form 107):
<u> </u>	No			
	Yes			
D	id you pay or agree to	pay someone who is not an at	torney to help you fill out b	ankruptcy forms?
l [No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,
L				Declaration and Signature (Official Form 119)

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Fill in this information to identify your case:				
Debtor 1	Jasmine		Ollins	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	,
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors I information below.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?					
	Creditor's name: OVERLND BOND Description of property securing debt: 2011 Dodge Journey	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	✓ No. Yes.					
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	No. Yes.					
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.					
	Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and	No. Yes.					

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Debtor	Jasmine		Ollins	Case number (if
1	First Name	Middle Name	Last Name	known)
Part 2:	List Your Unexpired	Personal Property Leas	es	
informa	tion below. Do not list re		l leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	scribe your unexpired pe	rsonal property leases		Will the lease be assumed?
Les	sor's name:			□ No □ Yes
	cription of leased perty:			_
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	cription of leased perty:			_
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			□ No □ Yes
	cription of leased perty:			_
Part 3:	Sign Below			
Unde			my intention about any	property of my estate that secures a debt and any personal
•	/s/ Jasmine Ollins		×	
_	gnature of Debtor 1		_	gnature of Debtor 2
	ate 6/29/2018		Da	

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

		Northern Distric	ct of Illinois	
re	Jasmine Ollins		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY F	OR DEBTOR
1	 Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf 	year before the filing of the p	etition in bankruptcy, or agreed to	be paid to me, for services
	For legal services, I have agreed to a	ocept		\$1,665.00
	Prior to the filing of this statement I	have received		\$0.00
	Balance Due			\$1,665.00
2	. The source of the compensation paid	d to me was:		
	✓ Debtor	Other (specify)		
3	. The source of the compensation paid	d to me is:		
	✓ Debtor	Other (specify)		
4	. I have not agreed to share the ab		with any other person unless the	y are
		w firm. A copy of the agreeme	h a other person or persons who a nt, together with a list of the name	
5	. In return for the above-disclosed fee	, I have agreed to render legal	service for all aspects of the bank	ruptcy case, including:
	 a. Analysis of the debtor's finar bankruptcy; 	icial situation, and rendering a	advice to the debtor in determining	g whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statemen	its of affairs and plan which may b	pe required;
	c. Representation of the debtor	at the meeting of creditors ar	nd confirmation hearing, and any a	adjourned hearings thereof;
6	. By agreement with the debtor(s), the	above-disclosed fee does no	t include the following services:	
		CERTIFICA	ATION	
	I certify that the foregoing is a completor(s) in this bankruptcy proceedings.	e statement of any agreemen	t or arrangement for payment to n	ne for representation of the
	6/29/2018		/s/ Michael Spangler	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Ollins, Jasmine	Case No	Case No.			
	Debtor(s)					
		Chapter.	Chapter7			
	VERIFI	CATION OF CREDITOR MAT	RIX			
Th knowledge		fy that the attached list of creditors is tru	ue and correct to the best of their			
Date:	6/29/2018	/s/ Ollins, Jasmin Ollins, Jasmine	е			
		Signature of Deb	tor			

OVERLND BOND 4701 W FULLERTON CHICAGO, IL, 60639

CREDITONEBNK PO BOX 98872 LAS VEGAS, NV, 89193

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

KOHLS/CAPONE PO BOX 3115 MILWAUKEE, WI, 53201

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA, KS, 67205

ABILITY RECOVERY SERVI PO BOX 4031 WYOMING, PA, 18644

TURNER ACCEP 4450 N WESTERN CHICAGO, IL, 60625

IRS 1 PO Box 7346 Philadelphia, PA, 19101

State of Illinois - Dept of Revenue Po Box 64338 Chicago, IL, 60664

Bank of America 1701 River Oaks Dr # D Calumet City, IL, 60409

IDES Springfield Po Box 19509 Springfield, IL, 62794 B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Jasmine Ollins	Case No.	
	Debtor		(If known)
		Chapter	Chapter 7
74	DISCLOSURE OF COMPE		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered or to be rendered on behalf of the debtor	ne filing of the petition in bankruptcy, or ag	reed to be paid to me, for services
	For legal services, I have agreed to accept		\$1,665.00
	Prior to the filing of this statement I have received		\$0.00
	Balance Due		\$1,665.00
2.	. The source of the compensation paid to me was:		
	Debtor	Other (specify)	
3.	. The source of the compensation paid to me is:		
	✓ Debtor	Other (specify)	
4.	I have not agreed to share the above-disclose members and associates of my law firm.	d compensation with any other person unle	ess they are
	I have agreed to share the above-disclosed comembers or associates of my law firm. A copy the people sharing in the compensation, is at	of the agreement, together with a list of th	
5.	. In return for the above-disclosed fee, I have agree	d to render legal service for all aspects of th	ne bankruptcy case, including:
	 a. Analysis of the debtor's financial situation bankruptcy; 	, and rendering advice to the debtor in dete	rmining whether to file a petition in
	b. Preparation and filing of any petition, sche	edules, statements of affairs and plan which	n may be required;
	c. Representation of the debtor at the meetin	g of creditors and confirmation hearing, an	d any adjourned hearings thereof;
6.	. By agreement with the debtor(s), the above-disclo	sed fee does not include the following serv	rices:
		CERTIFICATION	
	certify that the foregoing is a complete statement of tor(s) in this bankruptcy proceedings.	of any agreement or arrangement for payme	ent to me for representation of the
	6/29/2018	/s/ Michael Spangle	. Thungander
	Date	Signature of Attorney	1. 1.
		Semrad Law Firm	
		Name of law firm	



CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1665.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00 Motion to Reopen \$350.00 + court costs

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

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0/29/2018

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 6/29/2018

Client Jaam Oll

Client

Attorney

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Debtor 1 Jasmine First Name	Ollins		umber (if known)	
	Middle Name Last Na estions for Reporting Purposes	ame		
Part 6: Answer These Que 16. What kind of debts do you have?	16a. Are your debts primarily con "incurred by an individual prin No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus money for a business or inves No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you over	narily for a personal, famili iness debts? <i>Business de</i> stment or through the ope	y, or household pur ebts are debts that y ration of the busine	rpose." you incurred to obtain ess or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Chapter ✓ Yes. I am filing under Chapter 7. Description of the expenses are paid that funds ✓ No. ☐ Yes.	o you estimate that after any	exempt property is a to unsecured credi	excluded and administrative tors?
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	_ 5	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 mi \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	million 3	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Part 7: Sign Below		\$1,000,001-\$10 m \$10,000,001-\$50 r \$50,000,001-\$50 r \$50,000,001-\$50	million 3	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7. Sigil Delow	I have examined this position, and I	doolaro undor populty of r	acium that the infa	rmation provided is true and
For you	I have examined this petition, and I correct. If I have chosen to file under Chapt of title 11, United States Code. I ununder Chapter 7. If no attorney represents me and I cout this document, I have obtained I request relief in accordance with to I understand making a false statem connection with a bankruptcy case both. 18 U.S.C. §§ 152, 1341, 151.	er 7, I am aware that I may iderstand the relief available did not pay or agree to pay and read the notice requi he chapter of title 11, Uni ent, concealing property, can result in fines up to \$	r proceed, if eligible ole under each chap resone who is not red by 11 U.S.C. § ted States Code, spor obtaining money	e, under Chapter 7, 11,12, or 13 oter, and I choose to proceed not an attorney to help me fill 342(b). Decified in this petition. If or property by fraud in
	Signature of Debtor 1		Signature of Debtor 2	!
	Executed on 6/29/2018 MM / DD / Y	///	Executed on	MM / DD / YYYY

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Fill in this infor	mation to identify your c	ase:			
Debtor 1	Jasmine		Ollins		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	sankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					
Official	Form 106De	<u> </u>			Check if this is ar amended filing
Declarat	ion About an	Individual Deb	tor's Schedule	es	12/15
If two married	people are filing togeth	er, both are equally respo	onsible for supplying corr	ect information.	
money or prope	erty by fraud in connect 1341, 1519, and 3571.			Making a false statement, concealing pr to \$250,000, or imprisonment for up to 2	
Did you p	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
✓ No					
Yes. I	Name of person		Attach Bankruptc	cy Petition Preparer's Notice, Declaration, and	
1 142 1				175 = 4-4-	
	nalty of perjury, I declar are true and correct.	e that I have read the su	mmary and schedules file	ed with this declaration and	
·	0				

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

Date 6/29/2018 MM/DD/YYYY

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Deb	otor 1 Jasmine	Ollins	Case number (if known)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	First Name Middle Name	Last Name	
28.	Within 2 years before you filed for bankruptcy, did yo creditors, or other parties. No Yes. Fill in the details below.	u give a financial state	ment to anyone about your business? Include all financial institutions,
		Date issued	
	Name	MM/DD/YYYY	
	Number Street	-	
	City State Zip Code	-	
Part	rt 12: Sign Below		
1	true and correct. I understand that making a false star a bankruptcy case can result in fines up to \$250,000,	tement, concealing pro	hments, and I declare under penalty of perjury that the answers are operty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ Jasmine Ollins Signature of Debtor 1		Signature of Debtor 2
	Date 6/29/2018		Date
	Did you attach additional pages to Your Statement of	Financial Affairs for Inc	dividuals Filing for Bankruptcy (Official Form 107)?
I	✓ No		
I	Yes		
ı	Did you pay or agree to pay someone who is not an at	torney to help you fill o	ut bankruptcy forms?
1	☑ No		e agreement of grant and a
	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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ebtor	Jasmine		Ollins	Case number (if
	First Name	Middle Name	Last Name	known)
art 2:	List Your Unexpire	ed Personal Property Lease	s	
ıforma	ation below. Do not list		leases are leases tha	ry Contracts and Unexpired Leases (Official Form 106G), fill in the t are still in effect; the lease period has not yet ended. You may 1 U.S.C. § 365(p)(2).
De	scribe your unexpired	personal property leases		Will the lease be assumed?
Les	ssor's name:			☐ No ☐ Yes
	scription of leased operty:			_
Les	ssor's name:			☐ No ☐ Yes
	scription of leased operty:			_
Les	ssor's name:			☐ No ☐ Yes
	scription of leased pperty:			
Les	ssor's name:			□ No □ Yes
	scription of leased operty:			
Les	ssor's name:			☐ No ☐ Yes
	scription of leased operty:	- 3-08 x 08 ·	ratura	
Les	ssor's name:			☐ No ☐ Yes
	scription of leased operty:			2 2 2
Les	ssor's name:			☐ No ☐ Yes
	scription of leased operty:			—
rt 3:	Sign Below			
Und			ny intention about ar	y property of my estate that secures a debt and any personal
		kami Ol	- X	
	Signature of Debtor 1		The second secon	Signature of Debtor 2
0	Date 6/29/2018 MM/DD/YYYY		ı	Date MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Ollins, Jasmine Debtor(s)	Case No	
		Chapter	Chapter7
	VERII	FICATION OF CREDITOR	MATRIX
Tr knowledge		erify that the attached list of credito	ors is true and correct to the best of their
Date:	6/29/2018	Ollins, J	asmine fasmine fasmine re of Debtor

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Debtor 1 Jasmine		Ollins	Case numb	er (if known)			
First Name	Middle Name	Last Name					
			Column A Debtor 1		Column B Debtor 2 or non-filing spou	se	
8. Unemployment compensation			\$0.00				
Do not enter the amount if you cont under the Social Security Act. Instead		↓		_			
For you		\$0.00					
For your spouse		\$0.00					
 Pension or retirement income. Do benefit under the Social Security Act. 	•		\$0.00	-	-	_	
10.Income from all other sources neamount. Do not include any benefits payments received as a victim of a winternational or domestic terrorism. It page and put the total below.	received under the So var crime, a crime again	cial Security Act or st humanity, or					
			+\$0.00	-		-	
Total amounts from separate pages,	if any.		+\$0.00	_	+		
11. Calculate your total current mo each	nthly income. Add line	es 2 through 10 for	\$2,251.50	_	-	_ =	\$2,251.50
column. Then add the total for Co	lumn A to the total for	Column B.					T-1-1
t t							Total current monthly income
Part 2: Determine Whether the	Means Test Applie	s to You					
12. Calculate your current monthly i	ncome for the year. F	ollow these steps:					
12a. Copy your total current monthly	y income from line 11.			Copy line	e 11 here →		\$2,251.50
Multiply by 12 (the number of	months in a year).						X 12
12b. The result is your annual incom		orm.				12b.	\$27,018.00
	,						\$27,018.00
13 Calculate the median family inco	me that applies to vo	u. Follow these steps					
,,,,,	, , , , , , , , , , , , , , , , , , ,	Illinois	•				
Fill in the state in which you live.		3					
Fill in the number of people in your	nousehold.	3					
Fill in the median family income for y household.	our state and size of					13.	\$80,233.00
To find a list of applicable median in instructions for this form. This list m							
14. How do the lines compare?	*						(6):
14a. Line 12b is less than or eq Go to Part 3.	ual to line 13. On the t	op of page 1, check l	oox 1, There is no presum	nption of ab	ouse.		
14b. Line 12b is more than line Go to Part 3 and fill out Fo		e 1, check box 2, The	e presumption of abuse is	determine	d by Form 122A-	2.	
Part 3: Sign Below							
By signing here, I declare under pe	nalty of perjury that the	e information on this s	statement and in any attac	chments is t	true and correct.		
✗ /s/ Jasmine Ollins 🎶	50	,	×				
Signature of Debtor 1			Signature of Debtor 2				
Date 6/29/2018 MM/DD/YYYY			Date 6/29/2018 MM/DD/YYYY				
If you checked line 14a, do NOT If you checked line 14b, fill out F							